

Application for Change/Transfer of Water Right

For Ecology Use
(Date Stamp)
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FEB 18 2014

Department of Ecology
Eastern Regional Office

FOR OFFICIAL LISE ONLY

For filing with the Department of Ecology or with County Conservancy Boards

A NON-REFUNDABLE MINIMUM FEE OF \$50.00 MUST ACCOMPANY THIS APPLICATION IF FILED WITH THE DEPARTMENT OF ECOLOGY

Check all that apply.) □ Change purpose(s) of use □ Add purpose(s) of use □ Change point(s) of diversion/withdrawal X Add point(s) of diversion/withdrawal □ Change/transfer place of use □ Other (i.e. consolidation, intertie, trust water) Explain: **IF MORE SPACE IS NEEDED, ATTACH ADDITIONAL SHEETS (PLEASE PRINT OR TYPE CLEARLY)** □ I have participated in a pre-application confi	ference wit	CHECK NO. 31450 DATE ACCEPTED 3 CHANGE NO. CG3-2 COUNTY SPECIAL AREA SEPA: EXEMPT DE ECY CODING: 001-002-APP NO. 8023 CERT NO. 6086-A	8-2014 BY KRIF 108023C@/ L WRIA 55 2PP NOT EXEMPT WR10285-000011				
1. Applicant Information							
APPLICANT/BUSINESS NAME		PHONE NO.	FAX NO.				
Spokane County Water District No. 3		509-536-0121	509-534-3760				
ADDRESS							
1225 N. Yardley Street		27 =					
CITY		STATE	ZIP CODE				
Spokane		Washington	99212-7001				
EMAIL ADDRESS (IF AVAILABLE)							
Scwd3@comcast.net							
CONTACT (IF DIFFERENT FROM ABOVE)		PHONE NO.	FAX NO.				
ADDRESS		+ /					
CITY		STATE	ZIP CODE				
EMAIL ADDRESS (IF AVAILABLE)							
LEGAL LAND OWNER OF PART OWNER OF PROPOSED PLACE OF U	JSE	PHONE NO.	FAX NO.				
ADDRESS							
CITY		STATE	ZIP CODE				
EMAIL ADDRESS (IF AVAILABLE)							
2. Water Right Information							
WATER RIGHT OR CLAIM NUMBER	RECORDED N						
6086-A	Spokane (County Water Distric	t No. 3 (SCWD3)				
DO YOU OWN THE RIGHT TO BE CHANGED? X YES NO IF NO, PROVIDE OWNER(S) NAME and ADDRESS:							
HAS THE WATER BEEN PUT TO BENEFICIAL USE IN THE LAST FIV	E (5) YEARS?	X YES NO					

Please attach copies of any documentation that demonstrates consistent, historical use of water since the right was established. Also, if you have a water system plan or conservation plan, please include a copy with your application.

3. Point(s) of Diversion/Withdrawal: Add new point of withdrawal to consolidated water right

A. Existing

SOURCE	NO.	1/4	1/4	SEC.	TWP.	RGE.	PARCEL#	WELL TAG #
Guy/Freya Well	3-4	NW	SE	10	26N	43E	36104.0201	
Dakota Well	3-5	NW	NE	8	26N	43E	36081.0102	
Freya/Farwell Well	3-6	SE	SW	3	26N	43E	36033.0148	
Cherry/Farwell Well	3-7	SW	SW	3	26N	43E	36033.0190	
Guy/Freya Well	3-13	NW	SE	10	26N	43E	36104.0204	
Helena Well	3-14	NW	NW	9	26N	43E	36092.0703	

B. Proposed

SOURCE	NO.	1/4	1/4	SEC.	TWP.	RGE.	PARCEL#	WELL TAG #
Guy/Freya Well	3-4	NW	SE	10	26N	43E	36104.0201	
Dakota Well	3-5	NW	NE	8	26N	43E	36081.0102	
Freya/Farwell Well	3-6	SE	SW	3	26N	43E	36033.0148	
Cherry/Farwell Well	3-7	SW	SW	3	26N	43E	36033.0190	
Guy/Freya Well	3-13	NW	SE	10	26N	43E	36104.0204	
Helena Well	3-14	NW	NW	9	26N	43E	36092.0703	
Hawthorne Well	3-15	SE	NW	16	26N	43E	36165.9012	ACH-984

Please include copies of all water well reports involved with this proposal. Also, if you know the distances from the nearest section corner to the above point(s) of diversion/withdrawal, please include that information in Item No. 6 (remarks) or as an attachment.

4. Purpose of Use: NO CHANGE

A. Existing

PURPOSE OF USE	GPM or CFS	ACRE-FT/YR	PERIOD OF USE	
B. Proposed				
PURPOSE OF USE	GPM or CFS	ACRE-FT/YR	PERIOD OF USE	

5. Place of Use: NO CHANGE

A. Existing

LEGA	L DESCRIPT	ION OF LAND	S WHERE V	ATER IS PE	RESENTLY USED:		
1/4	1/4	SEC.	TWP.	RGE.	COUNTY	PARCEL#	# OF ACRES
		THE LANDS I		ING PLACE	 OF USE? ☐ YES ☐ NO		

R Proposed

B. P.	roposed						
LEGAL	DESCRIPT	ION OF LANI	S WHERE N	EW USE IS	PROPOSED:		
			/ * · · ·				
1/4	1/4	SEC.	TWP.	RGE.	COUNTY	PARCEL#	# OF ACRES
DO YO	U OWN ALL	THE LANDS I	N THE PROP	OSED PLACE	E OF USE? YES N	O	
IF NO,	PROVIDE OV	VNER(S) NAM	E:	-			

Attach a detailed map of your proposed change/transfer. The map should show existing and proposed point(s) of diversion/withdrawal, place of use and any other features involved with this application. If platted property, please include a certified copy of the plat map.

Are there any ADDITIONAL WATER rights OR CLAIMS RELATED to the same property as the ONE PROPOSED FOR CHANGE/TRANSFER?
x yes \square no-if yes, provide the water right/claim number(s): G3-23578C, 29-A, 3256-A, 3779-A, G3-00949C, &
G3-26510C

6. Remarks and Other Re		
	outh and 320 feet east of the center of S	
	and 220 feet east of the NW1/4 corner	
	et north and 115 feet west of the S1/4 co	
	et north and 240 feet east of the SW con	
	south and 310 feet east of the center of	
	th and 475 feet east of the NW corner of	the contract of the contract o
Hawthorne Well (3-15) 845 feet	north and 375 feet west of the center o	f Section 16
IF FOR SEASONAL OR TEMPORARY, STAR	T DATE/ END DATE/	/
of Revenue has requested notification with a copy of this request. For fi		seller of the water rights. The Department ated actions and therefore may be provided t of Revenue, Real Estate Excise Tax,
7. Signatures:		
I certify that the information abo	ove is true and accurate to the best of n	ny knowledge. I understand that in order
		of Ecology or the County Conservancy
		oses. If assisted in preparing this above
application, I understand that al	l responsibility for the accuracy of the	information rests with me.
		17
Ty Wick - General Manager	Vu la la la la	02/24/2014
Applicant Printed Name – Title	Applicant Signature	(Date)
Spokane County Water District		
Water Right Holder Printed Name	Water Right Holder Signature	(Date)
Land Owner of Existing Place of Use Printed N	Jame Land Owner of Existing Place of Use	Signature (Date)
Zana Owner of Existing Place of Ose Prince P	Land Owner of Little of Coc.	(Date)
Land Owner of Proposed Place of Use Printed	Name Land Owner of Proposed Place of Use	Signature (Date)
Please check the region in which the proj	ect is located:	
*Submit your application to:	☐ Central Regional Office	X Eastern Regional Office
DEPARTMENT OF ECOLOGY	15 W Yakima Avenue, Suite 200 Yakima, WA 98902	4601 N. Monroe Street Spokane, WA 99205-1295
CASHIERING SECTION	(509) 575-2490	(509) 329-3400
PO BOX 47611		
OLYMPIA, WA 98504-7611	☐ Northwest Regional Office	☐ Southwest Regional Office
	3190 – 160 th Avenue SE	PO Box 47775
	Bellevue, WA 98008-5452 (425) 649-7000	Olympia, WA 98504-7775 (360) 407-6300
	(125) 615,766	(000) 10, 0000
WE ARE RETURNING YOUR A	PPLICATION FOR THE FOLLOWING RE	ASON(S):
☐ APPLICATION FEE NOT		DED or INCOMPLETE
☐ ADDITIONAL SIGNATUR		IS INCOMPLETE
STAFF:	DATE:	/